

TOWN OF CRESTED BUTTE SIGN PERMIT APPLICATION

NAME_____PHONE_____

ADDRESS_____DATE_____

TYPE OF SIGN(S) _____,SIZE(S) _____

FEE_____DATE PAID_____ISSUED BY_____

MINIMUM FEE: \$10.00 & \$1.00 PER SQUARE FOOT OVER 10 SQUARE FEET

**USE THE SPACE BELOW TO DRAW A PICTURE OF THE SIGN(S) AND
LOCATION(S). ALSO INDICATE LIGHTING, COLORS, AND OTHER
INFORMATION.**

APPROVED_____DENIED_____REASON_____

BOZAR CHAIRMAN_____DATE_____